

EXHIBIT “B”

Anderson & Catania

Surety Services, LLC

Member National Association of Surety Bond Producers
707 Philadelphia Pike Wilmington, DE 19809
(302) 762-7599 Fax: (302) 762-7939 surety@acsurety.com



REPORT OF EXECUTION

Date: 06-Mar-19

Surety Copy

Bond Executed in the following Company:

Liberty Mutual Insurance Company

Principal:

Dobco, Inc.
30 Galesi Dr., Suite 202A
Wayne, NJ 07470
Account Number: CONV00248

Obligee:

United States Department of the Army
100 Penn Square East
Wannamaker Bldg, Phila Corps of Eng
Philadelphia, PA 19107-3390

Job Number:

Bond Number	Effective Date	Expiration Date	Statement
019066285	3/1/19	10/1/21	MAR 19

Processed By: Denise A. Medlar

Bond Amount	Contract Amount	Type	Invoice Number
\$23,981,295.00	\$23,981,295.00	CONTRACT	3289-1-1

Bond Description

Solicitation No. W912BU-19-C-0017 for Welsh Elementary School/Dover Air Base Middle School Replacement

Contract Amount = \$47,962,590 -

Premium	Commission	Due to Surety
\$155,506.00	\$18,854.85	\$136,651.15

Rate: ~~Rate Calculator~~ not used

\$14.40 Slide

** Arch is Co-Surety Bond No. SU1155760*

Invoice for A/R Only *Premium Includes 1/2 of \$20,347 Surcharge for 930 Day Completion Time (Surcharge is 7% of Premium For 7 Month Completion Time over 2 Years) Thank you.

PERFORMANCE BOND (See instructions on reverse)	DATE BOND EXECUTED (Must be same or later than date of contract) 03/01/2019	OMB Control Number: 9000-0045 Expiration Date: 7/31/2019
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Paperwork Reduction Act Statement - This information collection meets the requirements of 44 USC § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 9000-0045. We estimate that it will take 60 minutes to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: General Services Administration, Regulatory Secretariat Division (M1V1CB), 1800 F Street, NW, Washington, DC 20405.

PRINCIPAL (Legal name and business address) Dobco, Inc. 30 Galesi Drive, Suite 202A Wayne, NJ 07470	TYPE OF ORGANIZATION ("X" one) <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT VENTURE <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER (Specify)
STATE OF INCORPORATION New Jersey	

SURETY(IES) (Name(s) and business address(es)) Liberty Mutual Insurance Company 2200 Renaissance Blvd. King of Prussia, PA 19406	Arch Insurance Company Three Parkway, Suite 1500 Philadelphia, PA 19102	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="4">PENAL SUM OF BOND</th> </tr> <tr> <td style="width:25%;">MILLION(S)</td> <td style="width:25%;">THOUSAND(S)</td> <td style="width:25%;">HUNDRED(S)</td> <td style="width:25%;">CENTS</td> </tr> <tr> <td style="text-align: center;">47</td> <td style="text-align: center;">962</td> <td style="text-align: center;">590</td> <td style="text-align: center;">00</td> </tr> <tr> <td colspan="2">CONTRACT DATE</td> <td colspan="2">CONTRACT NUMBER</td> </tr> <tr> <td colspan="2" style="text-align: center;">02/27/2019</td> <td colspan="2" style="text-align: center;">W912BU-19-C-0017</td> </tr> </table>	PENAL SUM OF BOND				MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS	47	962	590	00	CONTRACT DATE		CONTRACT NUMBER		02/27/2019		W912BU-19-C-0017	
PENAL SUM OF BOND																						
MILLION(S)	THOUSAND(S)	HUNDRED(S)	CENTS																			
47	962	590	00																			
CONTRACT DATE		CONTRACT NUMBER																				
02/27/2019		W912BU-19-C-0017																				

OBLIGATION:

We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The Principal has entered into the contract identified above.

THEREFORE:

The above obligation is void if the Principal-

(a)(1) Performs and fulfills all the understanding, covenants, terms, conditions, and agreements of the contract during the original term of the contract and any extensions thereof that are granted by the Government, with or without notice of the Surety(ies) and during the life of any guaranty required under the contract, and

(2) Performs and fulfills all the undertakings, covenants, terms, conditions, and agreements of any and all duly authorized modifications of the contract that hereafter are made. Notice of those modifications to the Surety(ies) are waived.

(b) Pays to the Government the full amount of the taxes imposed by the Government, if the said contract is subject to 41 USC Chapter 31, Subchapter III, Bonds, which are collected, deducted, or withheld from wages paid by the Principal in carrying out the construction contract with respect to which this bond is furnished.

WITNESS:

The Principal and Surety(ies) executed this performance bond and affixed their seals on the above date.

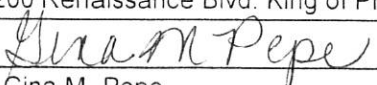
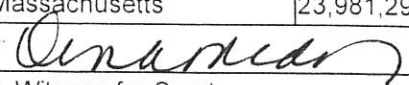
PRINCIPAL

SIGNATURE(S)	1. _____ (Seal)	2. _____ (Seal)	3. _____ (Seal)	Corporate Seal
NAME(S) & TITLE(S) (Typed)	1. _____	2. _____	3. _____	

INDIVIDUAL SURETY(IES)


SIGNATURE(S)	1. _____ (Seal)	2. _____ (Seal)
NAME(S) (Typed)	1. _____	2. _____

CORPORATE SURETY(IES)

SURETY A	NAME & ADDRESS	Liberty Mutual Insurance Company 2200 Renaissance Blvd. King of Prussia, PA 19406	STATE OF INCORPORATION Massachusetts	LIABILITY LIMIT (\$) 23,981,295	Corporate Seal
	SIGNATURE(S)	1. 	2. 		
	NAME(S) & TITLE(S) (Typed)	1. Gina M. Pepe Attorney-in-Fact	2. Witness for Surety		

CORPORATE SURETY(IES) (Continued)

SURETY B	NAME & ADDRESS	Arch Insurance Company Three Parkway, Suite 125 Philadelphia PA 19102	STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1. <i>Gina M. Pepe</i>	2. <i>[Signature]</i>	23,981,295	
	NAME(S) & TITLE(S) (Typed)	1. Gina M. Pepe Attorney-in-Fact	2. Witness for Surety		
SURETY C	NAME & ADDRESS		STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1.	2.		
	NAME(S) & TITLE(S) (Typed)	1.	2.		
SURETY D	NAME & ADDRESS		STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1.	2.		
	NAME(S) & TITLE(S) (Typed)	1.	2.		
SURETY E	NAME & ADDRESS		STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1.	2.		
	NAME(S) & TITLE(S) (Typed)	1.	2.		
SURETY F	NAME & ADDRESS		STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1.	2.		
	NAME(S) & TITLE(S) (Typed)	1.	2.		
SURETY G	NAME & ADDRESS		STATE OF INCORPORATION	LIABILITY LIMIT (\$)	Corporate Seal
	SIGNATURE(S)	1.	2.		
	NAME(S) & TITLE(S) (Typed)	1.	2.		

BOND PREMIUM		RATE PER THOUSAND (\$)	TOTAL (\$)
		\$14.40 slide	311,012.00

INSTRUCTIONS

1. This form is authorized for use in connection with Government contracts. Any deviation from this form will require the written approval of the Administrator of General Services.
2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitations listed therein. The value put into the LIABILITY LIMIT block is the penal sum (i.e., the face value) of bonds, unless a co-surety arrangement is proposed.

(b) When multiple corporate sureties are involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form, insert only the letter identifier corresponding to each of the sureties. Moreover, when co-surety arrangements exist, the parties may allocate their respective limitations of liability under the bonds, provided that the sum total of their liability equals 100% of the bond penal sum.

(c) When individual sureties are involved, a completed Affidavit of Individual Surety (Standard Form 28) for each individual surety shall accompany the bond. The government may require the surety to furnish additional substantiating information concerning its financial capability.
4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the words "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
5. Type the name and title of each person signing this bond in the space provided.

Liberty Mutual Insurance Company Bond# 019066285
Arch Insurance Company Bond# SU1155760

PAYMENT BOND (See instructions on reverse)		DATE BOND EXECUTED (Must be same or later than date of contract) 03/01/2019		OMB Control Number: 9000-0045 Expiration Date: 7/31/2019	
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PRINCIPAL (Legal name and business address) Dobco, Inc. 30 Galesi Drive, Suite 202A Wayne, NJ 07470			TYPE OF ORGANIZATION ("X" one) <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT VENTURE <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER (Specify)		
SURETY(IES) (Name(s) and business address(es)) Liberty Mutual Insurance Company 2200 Renaissance Blvd. King of Prussia, PA 19406			Arch Insurance Company Three Parkway, Suite 1500 Philadelphia, PA 19102		
			STATE OF INCORPORATION New Jersey		
			PENAL SUM OF BOND		
MILLION(S)		THOUSAND(S)		HUNDRED(S)	
47		962		590	
				CENTS	
				00	
CONTRACT DATE			CONTRACT NUMBER		
02/27/2019			W912BU-19-C-0017		

OBLIGATION:

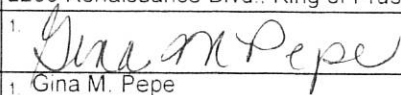
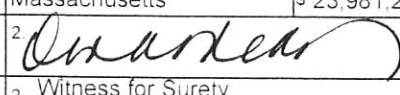
We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit is indicated, the limit of liability is the full amount of the penal sum.

CONDITIONS:

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the Principal for furnishing labor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

WITNESS:

The Principal and Surety(ies) executed this payment bond and affixed their seals on the above date.

PRINCIPAL					
SIGNATURE(S)	1	2	3	Corporate Seal	
	(Seal)	(Seal)	(Seal)		
NAME(S) & TITLE(S) (Typed)	1.	2.	3.		
INDIVIDUAL SURETY(IES)					
SIGNATURE(S)	1	2			
	(Seal)	(Seal)			
NAME(S) (Typed)	1	2			
CORPORATE SURETY(IES)					
SURETY A	NAME & ADDRESS	Liberty Mutual Insurance Company 2200 Renaissance Blvd., King of Prussia, PA 19406		STATE OF INCORPORATION	LIABILITY LIMIT
				Massachusetts	\$ 23,981,295
	SIGNATURE(S)	1. 	2. 	Corporate Seal	
NAME(S) & TITLE(S) (Typed)	1. Gina M. Pepe Attorney-in-Fact	2. Witness for Surety			

CORPORATE SURETY(IES) (Continued)						
SURETY B	NAME & ADDRESS	Arch Insurance Company Three Parkway Suite 1500, Philadelphia, PA 19102		STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1. <i>Gina M. Pepe</i>		2. <i>Witness for Surety</i>		
	NAME(S) & TITLE(S) (Typed)	1. Gina M. Pepe Attorney-in-Fact		2. Witness for Surety		
SURETY C	NAME & ADDRESS			STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.		2.		
	NAME(S) & TITLE(S) (Typed)	1.		2.		
SURETY D	NAME & ADDRESS			STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.		2.		
	NAME(S) & TITLE(S) (Typed)	1.		2.		
SURETY E	NAME & ADDRESS			STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.		2.		
	NAME(S) & TITLE(S) (Typed)	1.		2.		
SURETY F	NAME & ADDRESS			STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.		2.		
	NAME(S) & TITLE(S) (Typed)	1.		2.		
SURETY G	NAME & ADDRESS			STATE OF INCORPORATION	LIABILITY LIMIT	Corporate Seal
	SIGNATURE(S)	1.		2.		
	NAME(S) & TITLE(S) (Typed)	1.		2.		

INSTRUCTIONS

1. This form, for the protection of persons supplying labor and material, is used when a payment bond is required under 40 USC Chapter 31, Subchapter III, Bonds. Any deviation from this form will require the written approval of the Administrator of General Services.

2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.

3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitations listed therein. The value put into the LIABILITY LIMIT block is the penal sum (i.e., the face value) of the bond, unless a co-surety arrangement is proposed.

(b) When multiple corporate sureties are involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form, insert only the letter identifier corresponding to each of the sureties. Moreover, when co-surety arrangements exist, the parties may allocate their respective limitations of liability under the bonds, provided that the sum total of their liability equals 100% of the bond penal sum.

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